



**NEW HAMPSHIRE DEPARTMENT OF ENVIRONMENTAL SERVICES
WASTE MANAGEMENT DIVISION
Health and Human Services Building
6 Hazen Drive
Concord, NH 03301-6509**

Please print or type (Form designed for use on elite (12-pitch) typewriter)

Form Approved OMB No. 2050-0039, Expires 9-30-88

TO REPORT A SPILL, CONTACT NATIONAL EMERGENCY RESPONSE CENTER (1-800-424-8802), THE N.H. DEPT. OF SAFETY (1-800-852-3411) AND THE NH WASTE MANAGEMENT DIVISION (271-2942). TO REPORT OIL SPILL: NHWSPCD (271-3440).

| | | | | | | | | |
|--|--|---|--|--|-------------------|---|-----------------------------------|--------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | Generator's US EPA ID No. RI D045367763 | | Manifest Document No. 49865 | 2. Page 1 of 1 | Information in the shaded areas is not required by Federal law, but may be required by State Law. | | |
| 3. Generator's Name and Mailing Address Technor Apex Co. 508 Central Ave. Pawtucket, RI | | | | A. State Manifest Document Number NH C 0014865 | | B. State Generator's ID (Location) Same | | |
| 4. Generator's Phone (401) 725-8000 | | 6. US EPA ID Number MA D080030356 | | C. State Transporter's ID MA 1284 | | D. Transporter's Phone 508-657-7560 | | |
| 5. Transporter 1 Company Name Jeffrey Chemical Co., Inc. | | 8. US EPA ID Number | | E. State Transporter's ID | | F. Transporter's Phone | | |
| 7. Transporter 2 Company Name | | 10. US EPA ID Number NH D018958140 | | G. State Facility's ID SAME | | H. Facility's Phone 603-382-5761 | | |
| 9. Designated Facility Name and Site Address Beede Waste Oil Co. 7 Kelly Road Plaistow, NH 03865 | | | | 12. Containers | | 13. Total Quantity | 14. Unit Wt./Vol | 1. Waste No. |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | | | | No. | Type | | | |
| a. Not Regulated | | | | | | | | |
| b. Not Regulated | | | | 022 | DMO 11620P | | | R005 |
| c. | | | | | | | | |
| d. | | | | | | | | |
| J. Additional Descriptions for Materials Listed Above | | | | K. Handling Codes for Wastes Listed Above | | | | |
| a. Oil Contaminated Solids | | | | a. | | | | |
| b. Oil Contaminated Solids | | | | b. | | | | |
| 15. Special Handling Instructions and Additional Information 24 HOUR EMERGENCY PHONES | | | | | | | | |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. | | | | | | | | |
| Printed/Typed Name MARCO L. LEBLANC | | | | Signature <i>[Signature]</i> | | | Month Day Year 12/17/90 | |
| 17. Transporter 1 Acknowledgement of Receipt of Materials | | | | Printed/Typed Name DANA CALLAHAN | | | Signature <i>[Signature]</i> | |
| | | | | Month Day Year 12/17/90 | | | | |
| 18. Transporter 2 Acknowledgement or Receipt of Materials | | | | Printed/Typed Name | | | Signature | |
| | | | | Month Day Year | | | | |
| 19. Discrepancy Indication Space | | | | 4948-0013 | | | | |
| 20. Facility Owner, or Operator. Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19 | | | | Printed/Typed Name | | | | |
| | | | | Signature | | | Month Day Year | |